

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	V/N N		08-03-01
O.I.P.E. CLASSIFIER		15	09-01
FORMALITY REVIEW	KQ	703	09/19/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	11/11/01
2	✓	✓	11/11/01
3	✓	✓	11/11/01
4	✓	✓	11/11/01
5	✓	✓	11/11/01
6	✓	✓	11/11/01
7	✓	✓	11/11/01
8	✓	✓	11/11/01
9	✓	✓	11/11/01
10	✓	✓	11/11/01
11	✓	✓	11/11/01
12	✓	✓	11/11/01
13	✓	✓	11/11/01
14	✓	✓	11/11/01
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44	✓	✓	11/11/01
45	✓	✓	11/11/01
46	✓	✓	11/11/01
47	✓	✓	11/11/01
48	✓	✓	11/11/01
49	✓	✓	11/11/01
50	✓	✓	11/11/01

Claim	Final	Original	Date
51	✓	✓	11/11/01
52	✓	✓	11/11/01
53	✓	✓	11/11/01
54	✓	✓	11/11/01
55	✓	✓	11/11/01
56	✓	✓	11/11/01
57	✓	✓	11/11/01
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97	✓	✓	11/11/01
98	✓	✓	11/11/01
99	✓	✓	11/11/01
100	✓	✓	11/11/01

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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